

PART B - FEE(S) TRANSMITTAL

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22879 7590 03/12/2008

**HUEWLETT PACKARD COMPANY
P.O. BOX 272400, 3404 E. HARMONY ROAD
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10606463	06/26/2003	Benjamin Thomas Percer	200208051-1	3495

TITLE OF INVENTION: USE OF I2C-BASED POTENTIOMETERS TO ENABLE VOLTAGE RAIL VARIATION UNDER BMC CONTROL

APPN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PRIV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE PAID
nonprovisional	NO	\$1440	\$300	\$0	\$1740	06/12/2008

EXAMINER	ART UNIT	CLASS SUBJECT CLASS
BHAT, ADITYA S	2863	702-130600

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached
- ☐ "Fee Address" indication for "Fee Address" Indication form PTO/SB/447, Rev. 03-02, or more recent) attached. Use of a Customer Name is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1.	_____
2.	_____
3.	_____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue fee
- ☐ Publication fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit, any overpayment, to Deposit Account Number 08-2025 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Michael G. Verga/

Date June 11, 2008

Typed or printed name Michael G. Verga

Registration No. 39,410

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